

2013 OCT 22 AM 11:21

Committee Name: Detroiters Vote

FEC ID:

Date: 9/30/2013

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

## To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Thomas Choske, Treasurer

## 13031132585

FEC	
<b>FORM</b>	•

## STATEMENT OF ORGANIZATION



NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	PENTER
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2. DATE 0 9 3	ð ' 2,0 i 3	t sati is g	in the state of th	a'
3. FEC IDENTIFICATION NO	UMBER ▶			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	nis Statement and to the best of	of my knowledge and belief	t is true, correct and complete.	
Type or Print Name of Treasure	Thomas (	Choske		
Signature of Treasurer	Ohke		Date 0 9 3 0 2	ŏĭ3
NOTE: Submission of false, errone	eous, or incomplete information n	• • •	this Statement to the penalties of 2 U. NITHIN 10 DAYS.	S.C. §437g.
Office Use Only	160 -	For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		

	.O FUI	III (Nevised 02/2009)
		OMMITTEE
Cendi	idate	Committee:
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)
Name o		
Candida Party A		Office State on Sought: House Senate President District
(c)	]	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name o		
Party	Con	nmittee:
(d)	: -5  : -3	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
Politic	cal A	ction Committee (PAC):
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
		Corporation Corporation w/o Capital Stock Labor Organization
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
<b>(f)</b>	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
		In addition, this committee is a Lobbyist/Registrant PAC.
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint	Func	Iralsing Representative:
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal eandidate.
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	
	3.	FEC ID number C
	4.	
	→.	

FEC Form 1 (Revise	d 02/2009)		Page 3
Write or Type Committee Na	me		
Detroite	irs Vote		
6. Name of Any Connected	Organization, Affiliated Committee	e, Joint Fundralsing Represe	ntative, or Leadership PAC Sponsor
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Moiniel	<u> </u>	<u>                                     </u>	<u>                                      </u>
	1		
Mailing Address			
	1111111111	1111111	
	CITY	S S	TATE ZIP CODE
V			Leadership PAC Sponsor of the person in possession of committee
Full Name Lihi	Imas, Chos, Ke,		
Mailing Address	11.4.3.1, Washin	1191+1010 1811/VC	
	AP+ 12915		
	Deitivonit	<u> </u>	II 48226-
Title or Position	CITY	STA	ATE ZIP CODE
Treasure	<u></u>	Telephone number	13,13)-[28,8]-[8,667]

303113258

8. **Treasurer:** List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	mes, Cihio, Sike, , , , , , , , , , , , , , , , , , ,	1 1 1 1						
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Title or Position	CITY Telephone nu	STATE	31.	31-12	ZIP CC		56	2

	(Revised 02/2009)	-	Page 4
Full Name of Designated Agent	ashiingition Youson, Jr.		
Mailing Address	11.9.5.20, Rowe	111	11111111
	Deitiroiliti	J MJ	14.8.2051-
	CITY	STATE	ZIP CODE
Title or Position	ZA Telephone	e number [3]	131-14771-13,922
Banks or Other Dep safety deposit boxes     Name of Bank, Depo		mmittee deposits	funds, holds accounts, rents
LB	ank of America		
Mailing Address	500 Griswold		
		MI	4.8.2.2.6
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Federal Election Commission 999 E Street NW Washington, DC 20463

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DATE PREPARED

(8/2013)

**PREPARER**